

Certificate of Need Request for Extension

CERTIFICATE OF NEED PROGRAM

JUL 13 2015

To request a six-month extension to incur a capital expenditure or above-ground construction, complete this form in **RECEIVED**. Also submit a completed Periodic Progress Report with this form if it is due at this time. Send this information by email to CONP@health.mo.gov (preferred), fax at 573-751-7894, or mail to CONP, P.O. Box 570, Jefferson City, MO 65102. Request for extensions must be received in adequate time to allow for processing prior to the meeting for which a decision is scheduled.

Date: July 13, 2015	
Project #: 4919 DS	Project Name: LSS Continuing Care Retirement Community
Project Title/Description: Establish 60-Assisted Living Facility & 60 Bed SNF	
1. Briefly explain why a capital expenditure will not be incurred by the current deadline. Project delayed due to extended closing.	
2. Briefly state the reason(s) for the extension request. With delayed closing, beginning to start design and review marketing and financing options.	
3. What steps have been completed for the project to date and when were they completed?	
<u>Date Completed</u> 3/10/2015	<u>Step Completed</u> Closed on property
4. What steps are needed in order incur a capital expenditure (above ground construction or equipment lease/purchase) for the project, and when will they be completed?	
<u>Anticipated Completion Date</u> Fall 2016	<u>Step to be Completed</u> Complete design and marketing phase
5. What are the steps that will take place after the capital expenditure to complete the project and when do you anticipate that they will be completed?	
<u>Anticipated Completion Date</u> Fall 2015 Fall 2016 Spring 2017 Summer 2018	<u>Step to be Completed</u> Begin full design and marketing effort Start Construction Above Ground construction in place Finish construction and begin occupancy
6. Are planning and/or zoning matters complete, and is the site approved? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "no", explain.	
7. Has financing been secured for the project? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If financing has been acquired and documentation was not previously provided, attach a copy of the letter from the lender or 3 rd party documentation. Are financing contingencies complete? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is financing available for immediate disbursement for the project? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If the answer is "no" to any of the above questions, explain. See attached request for an extension for explanation. Give specifics of any and all existing financing problems and the reason(s) for their occurrence. See attached request for extension on general process for a CCRC development.	
8. Are there any new equity partners for the project as originally presented to the committee? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "yes", explain.	
9. Explain any and all restructuring of the project as originally presented to the committee. none	
10. Describe any anticipated situation(s) or problems not previously addressed that may prevent the project from incurring a capital expenditure by the end of the requested extension, should the extension be granted. none.	
11. If this extension is granted, do you anticipate that additional six-month extensions will be necessary?	

<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "yes", how many would be needed? <u>We are anticipating 5 based on our process to develop a CCRC.</u> Explain why additional extensions would be needed.		
Signature <i>Mark Schoedel</i>	Printed Name Mark Schoedel	Date 7-13-15

ATTACHMENT

Certificate of Need

Request for Extension

Project: #4919 DS Project Name: LSS Continuing Care Retirement Community

Project Title/Description: Establish 60-Assisted Living Facility and 60 Bed SNF

Lutheran Seniors Services has invested substantial time and finances (over \$3,542,000 to date to cover due diligence for the site, initial design and zoning) into the development of the new continuing care retirement community (CCRC) in Lake St. Louis. The due diligence phase for the site included getting Zoning and Master Plan approval as well as obtaining the necessary licenses for the health care areas. We finished the marketing studies to help size the project and get approval for Zoning and Master Plan for the site from the Springfield, Missouri. This included meeting with neighbors to communicate the concept of the CCRC of serving seniors from independent living through their health care needs in assisted and skilled nursing. From that design and approval we applied for the licenses for the needed healthcare beds and subsequently received them. We have finally closed on the property after resolving title issues and have begun demolition of existing buildings on site. We need to complete the architectural drawings and get final costs estimates so we can finalize our pricing for the Independent Living portion of the project. We hope to be in a position to start accepting contracts for the Independent Living apartments during the summer of 2016, and would hope to be in a position to start construction in late 2016. The access to licensed skilled beds is a critical component of a CCRC and as such it is not practical to start marketing until you can assure that the beds will be available. LSS is committed to this site and project and will continue to move toward obligation with respect to the approved 60 ALF and 60 SNF licensed beds. We anticipate that this obligation would happen in 2017.